

10/23/2001 12:38

95098688

LAW OFFICES OF JDM

PAGE 01/03

**LAW OFFICES OF JAMES D. McFARLAND**

12555 High Bluff Drive, Suite 280A • San Diego CA 92130

TEL (858) 509-8687 • FAX (858) 509-8688

**FAX Cover Sheet**

DATE: October 23 2001

No. of Pages (including cover):

TO: Name: **NASSER MOAZZAM**Company: **USPTO - CUSTOMER SERVICE**Fax No: (703) ~~308-7749~~ **746-7239**TC 2100 CSO  
STATUS INQUIRY  
RECEIVED

FROM: JimMcFarland, Customer No. 022,833

12555 High Bluff Dr., #280A, San Diego, CA 92130

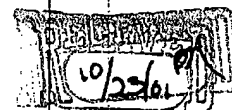
SUBJECT: **U.S. SERIAL NO. 09/854,039**OCT 23 2001  
Initials: **PR****NASSER**

Pursuant to our discussion this morning attached herewith is the Express Mail Certificate with the Mail date stamped on the receipt, which is the confirmed receipt of the application, by the PTO on May 11, 2001.

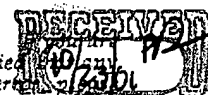
If you need any further documents or have any questions, please contact me at your convenience.

Thank you for your help.

Kim Casillas

**LAW OFFICES OF JAMES D. MCFARLAND****12555 HIGH BLUFF DRIVE, #280A****SAN DIEGO, CA 92130****James D. McFarland, Reg. No. 32,544****Official****BEST AVAILABLE COPY**

Notice: The information in this facsimile is intended only for the use of the individual(s) to whom it is addressed. Not the intended recipient (or the person responsible to deliver it to the intended recipient), you are hereby notified that use, disclosure or copying of this communication is strictly prohibited. If you have received this facsimile in error, please notify us immediately by telephone and return the received pages to us at the address above via U.S. Postal Service. We will reimburse you for any expenses you may incur in doing so.



10/23/2001

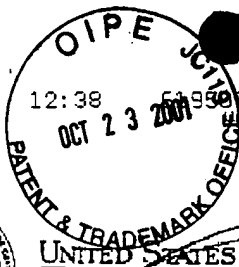
12:38

6195088588

LAW OFFICES OF JDM

PAGE 02/03

Page 1 of 2



UNITED STATES PATENT AND TRADEMARK OFFICE

 COMMISSIONER FOR PATENTS  
 UNITED STATES PATENT AND TRADEMARK OFFICE  
 WASHINGTON, D.C. 20231  
 www.uspto.gov

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/554,039	02/11/2001	2166	608	0720.P001A	46	32	5

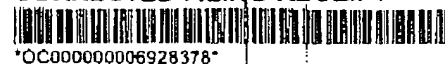
022883

 LAW OFFICES OF JAMES D MCFARLAND  
 12555 HIGH BLUFF DRIVE  
 SUITE 280 A  
 SAN DIEGO, CA 92130

 RECEIVED  
 NOV 29 2001  
 Group 2100

CONFIRMATION NO. 8173

CORRECTED FILING RECEIPT



\*OC00000006928378\*

Date Mailed: 10/18/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

**Applicant(s)**
 James P. Blasingame, Del Mar, CA;  
 William C. Mohlenbrock, Del Mar, CA;  
 Neil D. Mackenzie, San Francisco, CA;
**Domestic Priority data as claimed by applicant**

THIS APPLN CLAIMS BENEFIT OF 60/203,773 05/12/2000

**Foreign Applications**

If Required, Foreign Filing License Granted 07/11/2001

Projected Publication Date: 01/17/2002

Non-Publication Request: No

Early Publication Request: No

**\*\* SMALL ENTITY \*\*****Title**

Networked medical information system for clinical practices

**Preliminary Class**

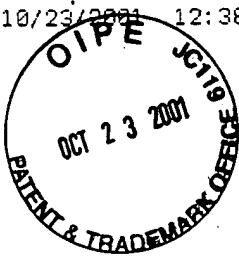
Official

10/23/2001 12:38

5195098688

LAW OFFICES OF JDM

PAGE 03/03



RECEIVED

NOV 29 2001

Group 2100

**POST OFFICE  
TO ADDRESSEE**


\*EL700202639US\*

EL700202639US

 SEE REVERSE SIDE FOR  
SERVICE GUARANTEE AND LIMITS  
ON INSURANCE COVERAGE

 Customer Copy  
Label 11-F, July 1997

**ORIGIN (POSTAL USE ONLY)**

DO ZIP Code 92130	Day of Delivery <input type="checkbox"/> Next <input type="checkbox"/> Second	Flat Rate Envelope <input type="checkbox"/>
Date in 5-18-01	<input type="checkbox"/> 12 Noon <input type="checkbox"/> 3 PM	Postage \$ 16.00
Time in 1047	<input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Return Receipt Fee
Weight 1.3 lbs.	Int'l Alpha Country Code	COD Fee Insurance Fee
No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday	Acceptance Clerk Initials JMS	Total Postage & Fees \$ 16.00

**CUSTOMER USE ONLY**

METHOD OF PAYMENT: Express Mail Commercial Airt. No. X921900	<input type="checkbox"/> WAIVER OF SIGNATURE (Domestic Only: Additional merchandise insurance is void if waiver of signature is requested. I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitute valid proof of delivery.
Federal Agency Airt. No. or Postal Agency Airt. No.	NO DELIVERY <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday

FROM: (PLEASE PRINT) JAMES MCFARLAND ATTORNEY AT LAW 12555 HIGH BLUFF DR STE 280A SAN DIEGO CA 92130-2036  0720.P001A	TO: (PLEASE PRINT) ASSISTANT COMMISSIONER FOR PATENTS BOX WASHINGTON DC 20231-0001 BOX NEW PATENT APPLICATION
--	--

**PRESS HARD.**

You are making 3 copies.

FOR PICKUP OR TRACKING CALL 1-800-222-1811

www.usps.gov



UNITED STATES  
POSTAL SERVICE®

usps.com

[Home](#) | [Sign In](#) | [Find ZIP Codes](#) | [Calculate Postage](#) | [Change Address](#) | [Locate Post Offices](#) | [Track/Co](#)[Introduction](#)[Ship](#)[Rates](#)[Supplies](#)[Web Tools](#)[Track & Confirm](#)[Delivery Confirmation™](#)[Signature Confirmation™](#)[Keyword/Search](#)POSTAL INSPECTORS  
Preserving the Trust

## ► Shipping Solutions *Track & Confirm*

### Shipment History

You entered EL70 0202 639U S

Your item was delivered at 6:49am on May 14, 2001 in WASHINGTON, DC 20231 to PATENTS 20231. The item was signed for by M BOSTON.

Here is what happened earlier:

- NOTICE LEFT, May 12, 2001, 2:50pm, WASHINGTON, DC 20231
- ARRIVAL AT UNIT, May 12, 2001, 1:59pm, ZIP Code 20085
- ENROUTE, May 11, 2001, 6:35pm
- ACCEPTANCE, May 11, 2001, 4:44pm, SAN DIEGO, CA 92130

[Request Delivery Record >](#)

### Track & Confirm

Enter number from shipping receipt  
the field below:[Go](#)[site map](#) | [contact us](#) | [FAQs](#) | [search](#) | [keywords](#)Copyright © 1999-2001 USPS. all rights reserved. [Terms of Use](#) [Privacy Commitment](#)



## UNITED STATES PATENT AND TRADEMARK OFFICE

**FILE COPY**
 COMMISSIONER FOR PATENTS  
 UNITED STATES PATENT AND TRADEMARK OFFICE  
 WASHINGTON, D.C. 20231  
 www.uspto.gov


Bib Data Sheet

#L CONFIRMATION NO. 8173

<b>SERIAL NUMBER</b> 09/854,039	<b>FILING DATE</b> 05/11/2001 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 2166	<b>ATTORNEY DOCKET NO.</b> 0720.P001A
<b>APPLICANTS</b> James P. Blasingame, Del Mar, CA; William C. Mohlenbrock, Del Mar, CA; Neil D. Mackenzie, San Francisco, CA;				
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/203,773 05/12/2000				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 07/11/2001				
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 46	<b>TOTAL CLAIMS</b> 32
<b>INDEPENDENT CLAIMS</b> 5				
<b>ADDRESS</b> 022833				
<b>TITLE</b> Networked medical information system for clinical practices				
<b>FILING FEE RECEIVED</b> 608	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



# UNITED STATES PATENT AND TRADEMARK OFFICE

**Patent Technology Center 2100**

## **Facsimile Transmission**

**To:**                      **Name:**                                      oipe  
                              **Company:**  
                              **Fax Number:**                                      7033087751  
                              **Voice Phone:**

**From:**                **Name:**  
                              **Voice Phone:**

This facsimile transmission is designed to increase the ease and speed by which the U.S. Patent and Trademark Office can communicate with applicants. The fax number used to transmit this document should not be used to submit responses to Office Actions or any other official communications with the Patent and Trademark Office. Please see the Manual of Patent Examining Procedure (MPEP) for the Office's complete policy concerning facsimile transmissions.

Fax Notes:

---

---

Date and time of transmission: Tuesday, October 23, 2001 4:08:34 PM  
Number of pages including this cover sheet: 04

---